

Weatherization Assistance Program Declaration of Ownership and Occupancy



To be used for occupancy issues where property is owned by a family member not living in the home.

Client Name: _____ Address: _____

City _____ Zip code _____

Approximate date property was acquired: _____ Length of time client has lived at property: _____

Based on circumstances, complete Part A or B:

PART A: HOME OWNED BY FAMILY MEMBER BUT NOT LIVING IN THE HOME

Name on recorded title: _____

Relationship to client: _____

Brief description of circumstances why relative is living in home:

PART B: HOME IS RECORDED IN FAMILY TRUST

Name family trust: _____

Relationship to client: _____

Brief description of why relative is currently living in home:

NOTE: Copy of Family Trust must be included if Part B is completed.

By signing this agreement I agree to permit the Agency to undertake weatherization activities allowed by federal law and regulations as determined necessary by an energy audit conducted by the Agency.

Property Owners Signature

Date

Address

.....
In the County of _____, State of Utah, on this _____ day of _____, 20____,
before me, the undersigned notary, personally appeared _____, who provided to me his/her identity
through documentary evidence in the form of a _____ to be the person whose name is signed o the
preceding document, and acknowledge to me that he/she signed it voluntarily for its stated purpose.

(Notary Public Seal)

Notary Signature